


PATIENT

Apollo Clay

PRESENTING CLINICAL SIGNS

History: Grade 2/6 heart murmur. Assess prior to dental.

SPECIES

Feline

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. The left ventricular walls are borderline in dimension with a discrete septal bulge. There is a mildly hyperechoic endocardium consistent with fibrosis and remodeling. Mild papillary muscle remodeling. The left atrium is normal in size. The right atrium is normal in size. The right ventricle appears normal. The mitral valve is normal in structure and mobility. Blood flow through the RVOT is laminar and normal in velocity. Mild intermittent LVOT obstruction is suspected (not captured on doppler). Trace mitral regurgitation. No valve leaks are identified. No evidence of cardiac tumors or effusions in this scan.

BREED

Maine Coon

SEX

Male Neutered

CARDIAC CHART
AGE

2 years

WEIGHT

13lbs

INTERPRETED BY

 Maggie Machen Lamy,
 DVM DACVIM
 (Cardiology)

IMAGING
PERFORMED BY

Lindsey Daniel, DVM

HOSPITAL NAME

 Thornton Animal
 Hospital

REFERRING VET

Dr. Killough

INVOICE

32518

DATE

8/23/23

FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm) <small>(Moise, Pipers)</small>	LVIDd (cm) <small>(Moise, Pipers)</small>	LVWd (cm) <small>(Moise, Pipers)</small>	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	0.35-0.55	<2 (mean 1.5)	3.5-0.55	35-67	80-100
PATIENT	5.9	130	0.77	1.49	0.55	48	83
FELINE CARDIAC PARAMETERS	LA/AO <small>(Boon)</small>	LA/AO HEART BASE (Swe) <small>(Abbott)</small>	LA 2D short axis Base view (cm) <small>(Abbott)</small>	LVOT VEL (m/s)	RVOT VEL (m/s)	E max (m/s)	
NORMAL	<1.5	<1.3	<1.2	<1.6	<1.3	<0.9	
PATIENT	1.3	1.3	1.3	1.0	0.96	NM	
<i>*Note: All measurements based upon multi-modal images and methods. An average value is reported.</i> Adapted from June Boon, Veterinary Echocardiography, 1998 Abbott J & MacLean H JVIM 2006;20: 111-119, Moise et al. Am J Vet Res 47:1476, 1986. Pipers et al. Am J Vet Res 40:882, 1979.							

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The primary abnormality identified is a discrete upper septal thickening with suspicion of an intermittent LVOT obstruction. The remainder of the LV is borderline, which may suggest early global hypertrophic changes. A normal variant cannot be ruled out and monitoring for progression is advised; however, given the predisposed signalment, suspicion is high. Regardless, the obstruction is mild and intermittent, and medications are not yet warranted at this time. Serial monitoring is certainly recommended however to screen for progression. The LA is normal, indicating low risk for complication. A screening blood pressure and T4 are recommended every 6-12 months as contributing factors.

Given these findings, no medications are indicated at this time as there is little risk for complication.



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Anesthetic risk is low if needed, however this patient is at elevated risk for IV fluid overload given the diastolic dysfunction and remodeling; judicious fluid rates are advised. Avoid heart rate stimulating drugs such as glycopyrrolate or atropine. No other specific restrictions are necessary.

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PLAN

Screening BP/T4 every 6 months recommended.

BREED

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Recommend recheck echocardiogram in 6-12 months to assess for progression, sooner if any associated clinical signs arise.

SEX

Male Neutered

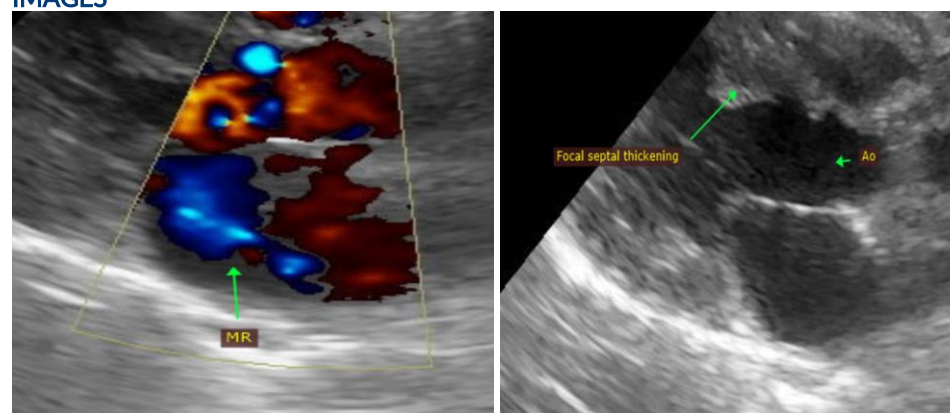
AGE

2 years

WEIGHT

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IMAGES



INTERPRETED BY

Maggie Machen Lamy,
DVM DACVIM
(Cardiology)

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

IMAGING PERFORMED BY

Lindsey Daniel, DVM

Thank you for this referral. This report was generated using transcription software, and minor dictation errors may be present. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance, please contact me.

HOSPITAL NAME

Thornton Animal
Hospital

Maggie Machen Lamy, DVM

Diplomate of the American College of Veterinary Internal Medicine (Cardiology)
info@sonopath.com

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